

Your response

Background information to consultation response:

I am an ESRC funded doctoral researcher within the Psychology, Psychotherapy & Counselling Division in the School of Applied Social Science at the University of Brighton. My research is examining participation in factual TV series about mental health that involve people taking part in interventions. This could be therapy such as CBT, or it could be other activities like exercise, singing or decluttering. Examples include *Mind Over Marathon (BBC1)*, *The Hoarder Next Door (C4)*, *Freaky Eaters (BBC3)* and *Obsessive Compulsive Cleaners (C4)*. My aims are to:

- Explore how participants understand and evaluate their experience of participating in and appearing on television shows involving mental health interventions
- Identify common themes and factors that make participation successful (or unsuccessful)

My answers to the questions in this consultation are based on observations from ongoing interviews that I am currently conducting with ex-TV participants, producers and psychologists involved in factual television series about mental health. It also draws on my own past experience as a producer working in factual television production. My research is ongoing, therefore these are some initial observations drawn from completed interviews in answer to questions 1,4,7 and 8. I am happy to discuss my research in more detail.

Question 1: Do you agree with our rationale for proposed new Rules 2.17 and 2.18? Please give reasons for your answer.

I support the principle of formalised code rules to reinforcing the commitment of broadcasters and production companies towards duty of care for TV participants.

- In the interviews I have conducted with production staff I have heard examples of duty of care being given much thought and planning however the overriding message has been that this is not necessarily the case within television production. Producers report that the extent to which participant care is given due consideration is variable and often influenced by the culture of individual production companies and expectations of individual broadcasters.
- Producers expressed concern that they were sometimes put in ethically challenging situations where editorial decisions were made which were not always in the best interest of participants.
- In addition, often the burden of day to day participant care falls disproportionately on the more junior members of staff which can create immense pressure
- Interviews with ex-TV participants suggest that both the production process and appearing on screen can be extremely challenging and has the potential to cause significant anxiety and distress if not managed carefully.
- New rules and code guidance which enshrine a principle of protecting participants from distress and anxiety will help to make participant care more of a standard industry practice rather than depending on the position taken by individual producers or team culture.

Question 4: Do you agree with the proposed wording for the new Rules 2.17 and 2.18? Please give reasons for your answer.

Whilst I agree with the principle of avoiding unjustified distress and anxiety to participants, I believe that the wording of 2.18 is potentially too broad.

- The research I have carried out so far suggests that the outcomes of taking part in a television series can be complex, multi-layered and hard to predict.
- The audience response and the impact of social media played a significant part in how participants felt about being on television. Participants' evaluation of appearing on television was extremely varied and within individual accounts there were presented both positives and negatives. However, even dealing with positive reactions from audiences was at times a source of significant distress.
- I think it is important that production companies need to be able to demonstrate that they are taking potential risks to participant wellbeing seriously – for example carrying out comprehensive risk assessments, making participants aware of both positive and negative outcomes, empowering participants to be able to discuss any concerns, making sure advice and support is clearly available during and post-broadcast.
- However rule 2.18 needs to allow for the unknown outcomes inherent in taking part in television. I would change the wording to reflect this.
- Suggestion: *Reasonable measures should be taken to ensure that participants are not caused unjustified distress or anxiety by taking part in programmes or by the broadcast of those programmes.*

Question 7: Do you agree with the proposed approach to the Code guidance? Please give reasons.
Question 8: Can you provide examples of best practice in the due care of programme participants which you think should be included in the guidance? Please share details if possible.

I agree with the main thrust of the guidance provided, in particular, that there needs to be flexibility dependent on the format and nature of participation. Below are some specific points from my research relating to good practice and ethical issues in the making mental health series that involve interventions, which I feel have wider relevance to participant care more broadly:

- There is an important difference between series that feature participants in their day to day lives and formatted series which are offering participants a specific opportunity or experience which a) may put them under greater pressure during filming b) influence their decision to take part. This is particularly the case with people whose decision to take part may be influenced by their desire to find help for mental health issues. In this situation, it may be necessary to have independent advice on whether taking part is in their best interest and assess whether they have fully understood the implications of appearing on television.
- It may also be important to consider the needs of people who have contacted a production because they are seeking help but are either not chosen or are edited out of the final broadcast. Where appropriate alternative sources of support should be suggested.
- Current guidelines do not address underlying vulnerabilities that adults may have, beyond their ability to consent. Specific consideration should be given to what additional support or considerations people with mental health issues may require before/during/after filming.

- It would be helpful to include examples of best practice when dealing with mental health (or other vulnerable adults). For example, some participants I interviewed felt empowered to say no to some filming or to request specific content not be used. This contrasted with the negative experience of one ex-TV participant who discussed feeling pressured into filming against their better judgement by the 'friendly' filming crew, because they didn't want to let them down.
- In another example of good practice, certain productions, whilst retaining editorial control, allow participants to pre-view the broadcast programmes. This can alleviate anxiety and prepare participants for how they will appear on screen.
- Production staff working with vulnerable participants should have appropriate training and support such as mental first aid training. It is important that the structure and procedures in place within a production, do not place the burden of participant responsibility too heavily on junior members of staff without suitable backup and training.
- Specific editorial techniques that could cause distress need to be risk assessed and justifiable. Whilst sometimes it may be necessary to put participants in a situation with the potential to cause them short term anxiety, it is important to consider questions like whether it is necessary for the participants to be surprised or unprepared for a particular filmed activity, and how the production team will deal with any negative fall out.
- Productions should have in place an aftercare plan that extends beyond the availability of counselling sessions. Important considerations include:
 - how participants may respond to the end of filming. This will depend on the amount and nature of filming and relationship with crew. For example, if crew have played an important social or therapeutic role in participant's lives, how can participants be supported to fill this gap post-production as appropriate.
 - Having a clear point of contact for any participants to raise concerns or get information, especially as production crew go on to other jobs
 - Support for participants in dealing with audience response and social media, including the pressure of positive attention and social media requests for help. It is not realistic to tell people not to engage with social media.